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CONFIRMATION NO. 8449

SERIAL NUMBER 10/630,755	FILING DATE 07/31/2003  RULE	CLASS 433	GROUP ART UNIT 3732	ATTORNEY DOCKET NO. KM102
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APPLICANTS

George Nikolov, Melbourne, AUSTRALIA;

\*\* CONTINUING DATA \*\*\*\*\*  
*none*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*none*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 01/02/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY AUSTRALIA	SHEETS DRAWING 12	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 1
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35 USC 119 (a-d) conditions met  
☐ yes ☒ no ☐ Met after

Verified and Acknowledged  
 Examiner's Signature: *[Signature]* Initials: *CD*

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TITLE  
 Sterilizable lower mandibular tooth extraction forceps

FILING FEE  RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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